

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 170
Registered No. 323

1. PLACE OF BIRTH

County Gila

District or Township

City Miami

State Arizona

or Village

No. 408

(If birth occurred in a hospital or institution, give its NAME instead of street and number) Frank Ave.

2. Full name of child Maria Graciela

Noriega

3. Sex of Child

To be answered ONLY
in event of plural
births.

4. Twin, triplet or other

6. Legitimate?

7. Date of birth July 21 1928
Month Day Year

8.

FATHER

Full name

Mmanuel Noriega

9. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami, Arizona

10. Color or race

Mexican

11. Age at last birthday 25 (Years)

12. Birthplace (city or place)

(State or country)

Yuma
Arizona

13. Occupation

Nature of industry

Machinist
Copper mine

MOTHER

Full maiden name

Hortencia Bainsera

15. Residence

(Usual place of abode)

If non-resident, give place and state.

Miami, Arizona

16. Color or race

Mexican

17. Age at last birthday 20 (Years)

18. Birthplace (city or place)

(State or country)

Mexico

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother 2

(Taken as of time of birth of child herein
certified and including this child).

(a) Born alive and now living 2
(b) Born alive but now dead 0
(c) Stillborn 0

21. Were precautions taken against oph-
thalmia neonatorum.

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE *

I hereby certify that I attended the birth of this child, who was alive

(Born alive or stillborn)

at 12:57 m. on the date above stated.

Signature

J. F. Miller

MD

(Physician or midwife).

Given name added from

a supplemental report.

Month, day, year

Address

Miami, Arizona

Filed

July 26, 1928

R. E. Form

Registrar.

Registrar.

451-721-821

made for each, the number of each

order of birth stated.

and at a birth, a SEPARATE RETURN